

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09/83195
APPLICANT(S)

FILING DATE

3-19-01

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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50						
TOTAL IND.	6					
TOTAL DEP.	21					
TOTAL CLAIMS	27					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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BEST AVAILABLE COPY